



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Groveport Madison Committee for Better Schools				
Full Name of Contributor GMLEA			Registration Number, if PAC	
Street Address 3696 Dorothy Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43224	Date (MM/DD/YYYY) 03/06/2019	Amount 45,000.00
Full Name of Contributor Jana Alig			Registration Number, if PAC	
Street Address 2958 Princeville Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) paypal
City Pickerington	State OH	Zip Code 43147	Date (MM/DD/YYYY) 02/26/2019	Amount 50.00
Full Name of Contributor Breanna Reed			Registration Number, if PAC	
Street Address 7351 Gearied St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) paypal
City Pickerington	State OH	Zip Code 43147	Date (MM/DD/YYYY) 03/13/2019	Amount 150.00
Full Name of Contributor Jana Alig			Registration Number, if PAC	
Street Address 2958 Princeville Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) paypal
City Pickerington	State OH	Zip Code 43147	Date (MM/DD/YYYY) 03/18/2019	Amount 75.00
Full Name of Contributor Dyanmix Energy Services			Registration Number, if PAC	
Street Address 855 Grandview Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43147	Date (MM/DD/YYYY)	Amount 12,500.00

*Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]